Amendment

☐ Yes

Disclosure Report Cover

Use this form for general report a Do not use this form to update in		formation, m	iust be signed and si	ubmitted alon	g with other detailed forms.
1. Committee Information					
a. Full Name	DESTRUCTION DE LA SESE			MY6H PE	c. ID Number
CAmpaign to	Elect	Gail.	McBrayer.	Strcklan	0 4J619F
b. Mailing Address (include City, State					d. Date Filed
165 Bryan Dr					10/22/10
Forest City,	NC 28	043			e. Phone Number 828-223-2879
2. Report Year 3. Period Start	Data ((11(-)	1 Dowled L	and Data ((14/)	5 Treasure	er Full Name
2. Report Year 3. Period Start	/ ()	4. Period E	16 10	Jane	A. McBrayer
6. Type of Committee (Check O		Type of Rep	ort (check only on	-	rt from one category)
Candidate Campaign Party		nicipal	State/County		Referendum
	rendum	Organizationa	l	itional	Organizational
☐ Independent Expenditure ☐ Joint	Fundraiser	Thirty-five day	y Quarterly	y	Pre-referendum
Legal Expense Fund		Pre-primary	Firs	it	Final
3.5		Pre-election	☐ Sec	ond	Supplemental Final
7. Type of Fund (if applicable,	check one)	Pre-runoff	Thi		Annual Annual
☐ Booster Fund	_	Semi-annual	☐ Fou		☐ Special
☐ Building Fund	빌	Mid Yea	<u> </u>		10 C 1 D 4 N
_	닖	Year End		l Year or End	10. Special Report Name
Other:	Report	Final Special	Final	ir End	2010 Third
8. Number of Fundraisers this	Keport	Speciai			Quarter Plus
- 0 -			☐ Special		Report
11. Account Information			11. Account Infor		
a. Financial Institution Full Name	1,		a. Financial Institution	i Full Name	
RBC Ban	10				
b. Purpose	c. Account Code	A-10	b. Purpose		c. Account Code
	1				
(Am. Daiaa	d. Period Begin Ba	alance			d. Period Begin Balance
Campaign	\$ 82.20	1			\$
GEOMAGA WAON	\$ 07.7	and the state of t	SPECIAL PROPERTY OF SPECIA	William Control	
CERTIFICATION		PRINCE AND	edening stratistica	.: 1 22 1 22	D 8 22D 22M -f.Ch 162
I certify that the Committee or Fur of the NC General Statutes and that report is complete, true and correct	at no funds are con	nmingled with	n prohibited or other n	on-disclosed fu	unds. I further certify that this
JAne A. Mil	Brayer	Jan	e Milson	(xa)	10-21-10
Printed Name of Sign	er	// Sig	nature of Appointed Tre	asurer	Date
FOR OFFICE USE ONLY					
Date Received:		Emplo	yee:	$ \stackrel{\underline{\mathrm{De}}}{\Box}$	livery Method Normal Mail
Date Postmarked:		Emplo	yee:	_ 🖁	Registered Mail Hand Delivered
Date Scanned:		Emplo	yee:	_	Electronically Filed
Date Data Entered:		Emplo	yee:		Signer has not received mandatory training
Please Note: This form ca		dian of book	nittee information sus information, or ac	count informa	ation.

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information

Amendment
☐ Yes ☐ No

Use this form to summarize all disclosure reporting forms and 1. Committee Full Name (and Fund if applicable)	2. Type of 1		3. ID Number
- Gail McBrau			
CAmpaign to Elect Strickland	2010	Third QTR. Total this	4J6/9F Total this
Start of Election Cycle: January 1, <u>2010</u>	•	Reporting Perio	중에 이렇게 되었다면 이렇게 하면 하면 하다.
4) Cash on Hand at Start		\$ 82.24	\$ -0-
RECEIPTS			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ - 0 -	\$ 89.00
6) Contributions from Individuals	(CRO-1210)	\$ 1022.24	f \$13,871.63
7) Contributions from Political Party Committees	(CRO-1220)	\$ 750.00	\$ 750.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ -0 -	\$ -0-
9) Loan Proceeds	(CRO-1410)	\$ 2,000.00	\$ 2,164.03
10) Refunds/Reimbursements to the Committee	(CRO-1240)	s - o -	\$ 29.99
11) Other Receipt Sources		建设设计算的	
11a) Interest on Bank Accounts	(CRO-1250)	\$.01	\$,03
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$ -0 -	S - 0 -
11c) Outside Sources of Income	(CRO-1250)	\$ - 0 -	s - o ·
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$ -0.	\$ -0-
11e) Exempt Purchase Price Sales	(CRO-1265)	\$ -O-	\$ _ 0 -
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	s 3,772.2	5 \$ 16,904.68
EXPENDITURES			
13) Disbursements		《	
13a) Operating Expenditures	(CRO-1310)	\$ 1,033.00	\$ 3,593.20
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ _0.	\$ -6-
13c) Coordinated Party Expenditures	(CRO-1310)	s _o-	\$ -0-
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ _6-	\$ -0-
15) Loan Repayments	(CRO-1420)	\$ -0-	s - o -
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ _6-	s 4,970.60
17) In-Kind Contributions	(CRO-1510)	\$ 372.2	4 \$ 5,891.63
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$ 1,405.2	
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18	\$ 2,449.2	5 \$ 2,449.25
ADDITIONAL INFORMATION			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 2,164.0	3
22) Debts and Obligations owed by the Committee	(CRO-1610)	0	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ -0-	
24) Account Transfers Within the Committee	(CRO-1720)	\$ -0-	
25) Administrative Support	(CRO-1710)		\$ - 6 .
26) Forgiven Loans	(CRO-1440)	\$ _ 0 -	\$ -0 -
27) 48-Hour Notice Reports Sum	(CRO-2220)	S - O -	\$ - 0 -
28) Contributions to be Refunded CRO-1100 NC State Box	(CRO-1215) ard of Elections	\$ - D -	\$ — D — August 2008

		om Individua		Pg	of <u>Z</u>	2	Amendment Yes No
a section of the sect	and the second s	ndividual contribution e (and Fund if appl	Control of the Contro	ontributions unde	er \$50 ii foriii Cr	-	D Number
				cl.	1 0		
CA	mpaign	to Elect 6	a. Mc Dra	yer all.	Word	(4J 619F
a control of the control	ributor Informa	Removal and the second		Add Ren	nove	1,0	
a. Full Na	me, Mailing Addre	ss & Phone	2444	b. Job Title/Profes	sion	d. C	omments
_	A	828-286		Educati	on		
Cyn	uthia	Walkup		c. Employer's Nan		İ	
20	5 Fern	Walkup word Br	_	Rutherd	and do		
				Rutherf	ra Co.	e. El	ection Sum to Date
	U	eten, NC	, ,	20,00		_	25.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	(y)	k. Amount
	.1	CHECK			8 (4/1	D	\$ 25.00
							S
							\$
3. Cont	ributor Informa	tion		Add Ren	nove		A CONTRACTOR OF THE SEC
a. Full Na	ame, Mailing Addre	ss & Phone		b. Job Title/Profes	sion	d. C	omments
		828-288	-6800	Homen	nallars		
KA	mona L	-anda		c. Employer's Nan	Maria de Caracteria de Car	1	
150	Farwa	in Dr.			93		
Dur	Har Carl	tun, NC 2	0,29	Retira	ed	e. El	lection Sum to Date
KW	inexpress	am, NC a	18121			\$	125.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	(y)	k. Amount
	1	CHECK			9/1/10		\$ (25.00
					1 1		\$
							\$
3. Cont	ributor Informa	ition		Add Rer	nove		
TO COUNTY OF BUILDINGS	ame, Mailing Addre	ss & Phone	- 6-1.1	b. Job Title/Profes	ssion	d. C	omments
1-	e city, state, & zip)	828.245		Retr	ed	C	and:dates
M.	nnie L	. MiBray	or	c. Employer's Nan	ne/Specific Field	5	sall.
15	v S. 1	lagrolia '	5t	Homes	naber	e El	Profiler Iection Sum to Date
Fo	rest Ci	th, NU 2	8043	(15,		\$	825.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yy	vv)	k. Amount
	\	CHECK			0/11/	0	\$ 200.00
		., , , , ,					s
							\$
4 Tot	l al only this Pa	l oge				\$	350.00
		O-1210 Pages					20.00
14. MARKET 11. 17. 17. 17. 17. 17. 17. 17. 17. 17.		of Detailed Summary P	age CRO-1100)			\$	1022.24

Contributions from Individuals	Pg	2 of 2	Yes MNo
Use this form to report individual contributions over \$50 or c	contributions unde		
1. Committee Full Name (and Fund if applicable)			2. ID Number
CAmpaign to Elect Guil Mc			4J619F
3. Contributor Information	Add Rem		
a. Full Name, Mailing Address & Phone	b. Job Title/Profess		d. Comments
(include city, state, & zip)	Retir	ed	Candidates
Minnie L. McBrayer 150 S. Magnolia St.	c. Employer's Nam	ne/Specific Field	Mother
	Hernam	aller	e. Election Sum to Date
Forest City, No 28043			\$ 1025.00
f. Prior g. Account Code h. Form of Payment i. In-Kind Descri	ption	j. Date (mm/dd/yyy	
- 1 CHECK		9 25/1	0 \$ 200.00
		, ,	\$
			\$
3. Contributor Information	Add Ren	nove	
a. Full Name, Mailing Address & Phone	b. Job Title/Profes	sion	d. Comments
(include city, state, & zip) \$28-286-273 (Atturna	244	
T. Eugene M. tchell	c. Employer's Nam		
113 W. Man St	Mitchel	1 LAW	e. Election Sum to Date
Spindale, NC 28160	OFF.ce		\$ 100.00
f. Prior g. Account Code h. Form of Payment i. In-Kind Descri	ption	j. Date (mm/dd/yyy	yy) k. Amount
- CHECK		10/15/1	0 \$ 100.W
		. 1	\$
			\$
3. Contributor Information	Add 🔲 Ren	nove	AND FOREST AND AND A
a. Full Name, Mailing Address & Phone	b. Job Title/Profes	sion	d. Comments
(include city, state, & zip) & 28 · 245 · 2156	Retir	· e al	
GAil M. Str. chland	c. Employer's Nan		Candidate
1373 old US 14 1149	Count	1	e. Election Sum to Date
Ellenburo, NC 28040	Govern	neut	\$
f. Prior g. Account Code h. Form of Payment i. In-Kind Descri		j. Date (mm/dd/yy	yy) k. Amount
1 N-Kind Advertis		9/6/11	\$ 372.24
	Stickers	4 1	\$
			\$
4. Total only this Page			\$ 672.24
5. Total of ALL CRO-1210 Pages			\$ 1022.2.4
(This line must be on line 6 of Detailed Summary Page CRO-1100)			1020.2

Amendment

Contributi	ana fuam Dalitia	al Danty Cammittaga	1 1	Amendment
		al Party Committees s from a political party	Pg of	Yes No
Market Commence	full Name (and Fund if		No. 5 Sales Company Company Company	2. ID Number
7 32		a D	Cl. 11	
camp		ect Guil M. Bray.		4J619F
3. Contributor		Add I	Remove	l. c.
a. Full Name, Mail (include city, sta	ing Address & Phone			b. Comments
		. 7	15.4	
Kuruu	fred Ceruli	Democratic Exe Veet Commit	CutiVe	
148W.	Iriain St	Veet		c. Election Sum to Date
Forust	City NO	28043		\$ 750.00
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yy)	yy) h. Amount
	CHECK		9/17/1	0 \$ 750.00
			3 1	\$
				\$
3. Contributor	Information	Add I	Remove	
- Collins and Collins and Conference of Conf	ling Address & Phone	to result the result of the result of		b. Comments
(include city, sta	te, & zip)			
				c. Election Sum to Date
				\$
11 10 1	F 6 D	f. In-Kind Description	g. Date (mm/dd/yy	yy) h. Amount
d. Account Code	e. Form of Payment	I. In-Kina Description	g. Date (minutary)	Asses
				\$
				\$
				\$
3. Contributor	Information	Add 1	Remove	
Jack Box - The second second process of the second	ling Address & Phone			b. Comments
(include city, sta	nte, & zip)			
1				c. Election Sum to Date
				\$
d. Account Code	e. Form of Payment	f. In-Kind Description	g. Date (mm/dd/yy	ryy) h. Amount
di Mecodine Code		•		S
				s
				s
4. Total only	v this Page		Sand Sandara	1\$ 750.00
	LL CRO-1220 Pag	res		\$ 750.00
	be on line 7 of Detailed Sumn			1.750.00

Other Rec	eipt Sources		Р	e l of	Amendment Yes No
	report income not report	ed on another form.	i.e. interest inc	ome, not for profi	/ -
1. Committee H	full Name (and Fund if	applicable)			2. ID Number
Campai	on to Elect	Gail Mit	Brayer :	Strickland	4J619F
	eipt Source (Please use				
Interest		tions from Not-for-Profit			Sources of Income
4. Contributor			Add R	emove	d. Comments
	ing Address & Phone te, & zip) & Z & -	267-6444	D. Not-for-Profit	t Federal ID#	d. Comments
DD c	Rale		0.11.0		_
275	N. Mans extrator, ,	+	c. Outside Source	L Crol·Le	d .
213	1		to che	cking	e. Election Sum to Date
Ruth	enfunction, ,	1628139	Accom	at o	\$.01
f. Account Code	g. Form of Payment	h. In-Kind Description	ı	i. Date (mm/dd/yy	yy) j. Amount
1	cred:+				\$.01
					\$
4. Contributor	Information		Add 🔲 R	emove	
a. Full Name, Mai	ling Address & Phone		b. Not-for-Profi	t Federal ID #	d. Comments
(include city, sta	ite, & zip)		-		
			c. Outside Sour	ce Explanation	
					e. Election Sum to Date
					\$
f. Account Code	g. Form of Payment	h. In-Kind Description	n	i. Date (mm/dd/yy	yy) j. Amount
					S
					\$
4. Contributor	Information		Add 🔲 R	emove	
	ling Address & Phone		b. Not-for-Profi	t Federal ID #	d. Comments
(include city, sta	ite, & zip)				
			c. Outside Sour	ce Explanation	
					e. Election Sum to Date
					\$
f. Account Code	g. Form of Payment	h. In-Kind Descriptio	n	i. Date (mm/dd/yy	
	•	•			s
					s
5. Total only	this Page				Is . 0)

(This line goes in line 11c of Detailed Summary Page CRO-1100 if Outside Sources of Income)

CRO-1250

NC State Board of Elections

December 2007

001

6. Total of ALL CRO-1250 Pages

(This line goes in line 11a of Detailed Summary Page CRO-1100 if Interest)

 $(This\ line\ goes\ in\ line\ 11b\ of\ Detailed\ Summary\ Page\ CRO-1100\ if\ Not-for-Profit\ Contribution)$

D. I		
Dign	ursement	C
LIBO	ui scilicile	0

1	2	Amendmen	t
Pg\	_ of	_ Pres	No.

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

nber
619F
enditures
ts
1
Sum to Date
rum to Date
00
arks
sing for
unanient
wanty
ts
3.11.11
1
1
Sum to Date
.00
arks
fest Booth
utherfratu
ts
1
- 1
Sum to Date
Sum to Date
5.00
arks
tione
.,21.
\sim
5.00
33.00
77.00
STOCKED CONTRACTOR OF THE STOCKED
late
Office Expenses
al Expense Fund
PASSAGE SERVE

	T		000000000000000000000000000000000000000
HIC	hii	rcen	nents
כוע	vu.	1301	CILLO

Pg	2	of	3	Amendment Yes		
- 6					The state of the s	

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

	ull Name (and Fund	Name and Address of the Owner, where the Party of the Owner, where the Party of the Owner, where the Owner, which is the Owner, where the Owner, which is th				2. ID Number	1 - 1 - 1 to
Campai	ign to Ele	et Guil					=
3. Type of Disb	THE RESIDENCE OF THE PARTY OF T	use separate CR	O-1310	forms for e	each type of Dist	bursement.)	
Operating Expe		tributions to Candida	tes/Politic	cal Committees	Coc	ordinated Party Expenditures	
4. Payee Inforn				Add	Remove		
a. Full Name, M	ailing Address & Pho	one con	1	b. Coordinate	ed Committee Nam	e d. Comments	
(include city, state,	& zip) 82(-	247 - 488					
WAGY				a I aval Dagic	stered (Specify)		
15 6	1. Powell	<1.		Federal	County:		
				State	Municip	ality: e. Election Sum to Date	Charles
FINIT	City, No a	CN13					1000
10125	419,100	20077				\$ 400.00	- 1
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	CHECK	A	10/	4/10	\$200.00	RAdio Ad	
	01,000	- / (1			1 0 0 7 0 2	\dashv
					12		
4. Payee Inforn	ACCURATION NOT THE RESIDENCE OF THE PARTY OF			Add	Remove		
	ing Address & Phone			b. Coordinate	ed Committee Nam	e d. Comments	
(include city, stat	te, & zip) 82 &-	287.355					
CF Po	ese + Son-	2		. Tours Deat	stered (Specify)		
0				Federal	County:	2000	
831 N	. Man S	+		State	Municip	ality: e. Election Sum to Date	THE ST
0			_	State	— жинер		Ser an investigation
Kuthe	wholeton, 1	10 2813	.9			\$ 199.68	
f. Account Code	g. Rorm of Payment			mm/dd/yyyy)	j. Amount	k. Required Remarks	
1	CHECK	A	10/	4/10	\$122.00	Helium for E	3010m
\	CAROLL		1	7/10			
				W	\$	Ellenboro Fair	
4. Payee Inforn	nation			Add	Remove		ties.
a. Full Name, Mail	ing Address & Phone			b. Coordinat	ed Committee Nam	e d. Comments	E partic
(include city, star	te, & zip)						
the D	saily Con	x: ex					
1116		1101			istered (Specify)	2802	
601	Sal St			Federal State	County:	e. Election Sum to Date	7-7-5
1	L ('1 .	a ((), (State	Mullicip		46/255
Forest	Lity, NO	2804	3			\$ 700.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
i. Account Code		Λ		11.		News paper +	1.0
	CHECK	A	10	17 119	\$ 200.00	Tours paper p	ta
					\$		
5. Total only th	is Page					\$ 522.00	
	CRO-1310 Pages						
CONTRACTOR OF THE CONTRACTOR O	line 13a of Detailed Sun	nmary Page CRO-L	IOO if One	rating Fynens	eec)	\$ 1033.00	- 1
	tine 13t of Detailed Sun tline 13b of Detailed Sun						
	line 13c of Detailed Sun						
7. Purpose C	THE STATE OF THE S	expenditure cod	NO DESCRIPTION AND	MANAGEMENT PROPERTY.			
A* - Media	B* - Printi	Participation of the second se	up-control voice of	undraising	D - To	Another Candidate	
E - Salaries	F* - Equip			litical Party		Iolding Public Office Expen	ises
I - Postage	J - Penalti			Office Exper		Onation to Legal Expense	
O* Other	Janata	***			The second second		
	re detailed explanat	ion in required	remark	s field (k)			

TI	The same of the same			
1110	DITE	cam	ant	C
DIO	bur	26111	CIII	o

	2		7	Amendment	
Pg	<u></u>	of	2	☐ Yes	No No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee 1	Full Name (and Fun	d if applicable)					2. ID Number
CAmpa					ner Strice		
3. Type of Dist	See the first with the property with the second section of the second section of the second section of the second section sect	e use separate CF					The second secon
Operating Exp		ntributions to Candida	tes/Politi			ordina	ited Party Expenditures
4. Payee Inform	Sept. School Sept.	2000	Ц	Add L	Remove	S S A S	
a. Full Name, N (include city, state	Mailing Address & Ph	287.335	6	b. Coordinat	ed Committee Nar	ne	d. Comments
_		20172	.0				
WCAB				c. Level Regi	stered (Specify)		
POPSU	hitesides R	1		Federal	County:		
ig I W	hit esides R			State	Munici	pality:	e. Election Sum to Date
Ruthe	gratin	NU 28				_	\$ 446.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. F	Required Remarks
	CHECK	A	101	5/10	\$ 96.00	1	RAdio Ad
			,	· · · · ·	\$		
4. Payee Inform	mation		1116	Add	Remove	No.	
	ling Address & Phone			b. Coordinat	ed Committee Nar	ne	d. Comments
(include city, sta	ate, & zip)			-			
				c Level Regi	stered (Specify)	MK-3	+
				Federal	County		
				State	Munici		e. Election Sum to Date
							s
		lin oi	To Line Mar		L	I. v	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date ((mm/dd/yyyy)	j. Amount	K. F	Required Remarks
					\$	_	
					\$		
4. Payee Inform	mation	SPARKED HOLD		Add	Remove		的复数形式 医胸侧性
	ling Address & Phone			b. Coordinat	ed Committee Nar	ne	d. Comments
(include city, sta	ite, & zip)		65.27				
				a Tanal Dani	stered (Specify)	or and the	1
				Federal	County:		
				State	Municip		e. Election Sum to Date
							\$
		li n. Gil	L D		Last Masses are Democratic	l. r	USES
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	к. н	Required Remarks
					\$	_	
					\$. 15	
5. Total only tl	nis Page						\$ 96.00
6. Total of AL	L CRO-1310 Pages						
(1)	n line 13a of Detailed Sui			1076			\$ 1033.00
, ,	n line 13b of Detailed Sun n line 13c of Detailed Sun	• •				m)	1005.00
	odes (List detailed						
A* - Media	B* - Printi			undraising	D - To	Ano	ther Candidate
E - Salaries	F* - Equip			litical Party			ng Public Office Expenses
I - Postage	J - Penalt	ies	K* - C	Office Expen	ises Q* - I	Onat	tion to Legal Expense Fund
O* Other			to accompany to		NATIONAL TATORINA INVOLUTION	STATE OF THE PARTY	WAR THOUGHT IN COMPANY TO SERVICE WATER TO THE TANK THE T
* Codes requi	re detailed explanat	ion in required i	emark	s field (k)	PHE WAS ALL ALL AND	CARSON !	

Loan Proceeds			Pσ	of		(Amendment Yes	ĽΚ _{No}
Use this form to report proceeds from a loan and loan	endorse	er's informat	tion	"	-		163	
A loan proceeds statement must accompany each loan	that is	from an ind	ividua	1				
1. Committee Full Name (and Fund if applicable)		Now Personal Na				2. I	ID Number	
CAmpaign to Elect Gail	Mil				rel		456	19F
3. Lender Information		The Control of the Co	Rem	CONTRACTOR OF THE				
a. Full Name, Mailing Address & Phone (include city, state, & zip) & 2 & 245-2		b. Job Title/	N. 10 (10 (10 (10 (10 (10 (10 (10 (10 (10	1	388	1 1 0 L C C C C C C C C C C C C C C C C C C	Comments andid	1.6
	17.0	C0-00	une	r/		5	and a	ares
Donglas Strickland		Grad	dina	9		e. St	tart Date (mn	n/dd/yyyy)
1373 Old US 74 Hw	4	c. Employer	's Nam	esspecific Fie	ld		10-15.	-2010
Ellenboro, No 2804	0	24.0	Kto	and		f. Ei	nd Date (mm/	/dd/yyyy)
2112123110,100		Grad	mg	(40.		1	12-31	-2010
g. Rate h. Security Pledged	i. Accou	nt Code	j. Form of Payment		ıt			
0% None		l	C	HELL			\$ 2,0	00.00
I. Full Name of Lending Institution					93	m. I	Loan Number	
NA						٨	JA	
4. Endorsers/Makers (The people who guarantee the loan	n.)							
a. Full Name, Mailing Address & Phone		b. Job Title/	Profess	sion	c. E	mplo	yer's Name/S	pecific Field
(include city, state, & zip)								
		d. Percentag	e		e. A	mour	nt	
				%	\$			
a. Full Name, Mailing Address & Phone		b. Job Title/I	Profess	ion	c. E	mplo	yer's Name/S	pecific Field
(include city, state, & zip)								
		d. Percentag	e		e. A	moun	nt	ALC: The Part
				%	\$			
a. Full Name, Mailing Address & Phone		b. Job Title/I	Profess	ion	c. Eı	mploy	yer's Name/S	pecific Field
(include city, state, & zip)	Section 1							
		d. Percentage	e		e. A	moun	nt	WATER 1
				%	\$			
a. Full Name, Mailing Address & Phone		b. Job Title/I	Profess	ion	c. Ei	mplo	yer's Name/S	pecific Field
(include city, state, & zip)								
		d. Percentage	e		e. Aı	moun	ıt	
				nt.	d			

\$ 2,000.00

Outstanding Loans

				Amendment					
Pg		of	_(☐ Yes	No.				

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)	2. ID Number			
campaign to Elect Gail	M.Bragar Str: chile	Pad 45619F		
3. Lender Information	Add Remove			
a. Full Name, Mailing Address & Phone	b. Job Title/Profession	d. Comments		
(include city, state, & zip)	energy g	Da sidata		
GAII M. Strickland	Retred	e. Start Date (mm/dd/yyyy)		
1313 old US 74 Hwy	c. Employer's Name/Specific Field			
V		7/22/10		
Ellenboro, NC 28040	County	f. End Date (mm/dd/yyyy)		
Charles, 100 asua	Government			
	N-1000 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 -			
g. Rate h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance		
0% None	\$ 164.03	\$ 164.03		
k. Full Name of Lending Institution		l. Loan Number		
NA		NA		
3. Lender Information	Add Remove	Manufacture of the state of the		
a. Full Name, Mailing Address & Phone	b. Job Title/Profession	d. Comments		
(include city, state, & zip)	Co-owner/	Cardidate o		
Donalas Strickland		e. Start Date (mm/dd/yyyy)		
	c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)		
1373 Old US74 Hwy		10/15/10		
Ellenboro, NC 28040	Strickland	f. End Date (mm/dd/yyyy)		
Ellener, of SOTO		, 1		
	Grading Co.	12/31/10		
g. Rate h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance		
0% None	\$ 2,000.00	\$ 2,000.00		
k. Full Name of Lending Institution		l. Loan Number		
NA		NA		
3. Lender Information	Add Remove			
a. Full Name, Mailing Address & Phone	b. Job Title/Profession	d. Comments		
(include city, state, & zip)				
	Tarabara I Nama / Chaol Sia Field	e. Start Date (mm/dd/yyyy)		
	c. Employer's Name/Specific Field	4		
		f. End Date (mm/dd/yyyy)		
		I. Did Date (initiation 3333)		
g. Rate h. Security Pledged	j. Remaining Loan Balance			
%	\$	\$		
k. Full Name of Lending Institution	A TRUE BUT YOU THEFT	l. Loan Number		
4. Total only this Page		1 \$ 2,164.03		
5. Total of ALL CRO-1430 Pages		\$ 2,164.03		
(This line must be on line 21 of Detailed Summary Page CRO-1100)	1 2,164.03			

T. Vi. J Cartaibutions		1	1	Amendment
In-Kind Contributions	Pg	of		Yes No
Use this form to report non-monetary contributions, donations, good Use CRO-1215 if In-Kind Contributions were or will be refunded.			ttee o	r fund.
1. Committee Full Name (and Fund if applicable)	ded within , se,	/5.	2. I	ID Number
CAmpaign to Elect Guild	1. Braza	(tridela	0	4.5619F
3. Contributor Information	Add Ren	move	ta	
a. Full Name, Mailing Address & Phone	b. Type of Contrib	The state of the s	le, C	Comments
(include city, state, & zip) 845-292-7677	Individual	Justin		Muncho
ROSS Industries, INC	Candidate Party			
60 State Street	PAC Referendum		La E	Election Sum to Date
Liberty, NY 12754	Other Receipt	Source	-	372.24
e. Description Credit Card Purch	hase	f. Date (mm/dd/yy)		g. Fair Market Amount
Pencils, suckers + Sticker		9/6/1	0	\$ 372.24
		1. /		s
				\$
3. Contributor Information	Add Ren	move		
a. Full Name, Mailing Address & Phone	b. Type of Contrib		c. Ce	comments
(include city, state, & zip)	Individual	(Castelline)		
	Candidate			
	Party			
	☐ PAC			
	Referendum		d. El	Election Sum to Date
	Other Receipt	Source	\$	
e. Description	Jazzen eta	f. Date (mm/dd/yy)	yy)	g. Fair Market Amount
				\$
				s
				\$
3. Contributor Information	Add Ren	move	**************************************	
a. Full Name, Mailing Address & Phone	b. Type of Contrib		c. Co	omments
(include city, state, & zip)	Individual			
	☐ Candidate			
	Party			
	PAC			
	Referendum		d. El	lection Sum to Date
	Other Receipt		\$	
e. Description		f. Date (mm/dd/yyy	yy)	g. Fair Market Amount
				\$
				s
				\$
4. Total only this Page			\$	372.24
5. Total of ALL CRO-1510 Pages	THE RESERVE TO SERVE THE PROPERTY OF THE PARTY OF THE PAR	The second secon	-	